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PATENT

I hereby certify that on the date specified below, this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to the Commissioner for Patents, Washington, DC 20231.

Date

FEB. 20, 2003

Joanne Bourguignon

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Joseph F. Walsh
Application No. : 09/847,892
Filed : May 2, 2001
For : Low-Power Hand-Held Transaction Device

Examiner : Thien Minh Le
Art Unit : 2876
Docket No. : 35006.019CIP
Date : February 20, 2003

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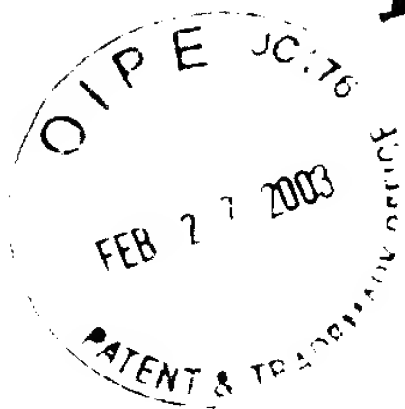
Commissioner for Patents
Washington, DC 20231

AMENDMENT

INTRODUCTORY COMMENTS

Sir:

In response to the Office Action dated November 20, 2002, please amend the application as follows:



OLYMPIC PATENT WORKS PLLC

101 YESLER WAY, SUITE 505
SEATTLE, WA 98104MAILING ADDRESS:
P.O. BOX 4277
SEATTLE, WA 98104206.621.1933 (MAIN)
206.621.5302 (FAX)Docket No.: 35006.019CIP
Date: February 20, 2003

In re application of **Joseph F. Walsh**
Application No.: **09/847,892**
Filed: **May 2, 2001**
For: **Low-Power Hand-Held Transaction Device**

COMMISSIONER FOR PATENTS
WASHINGTON DC 20231

Sir:

Transmitted herewith is **an amendment** in the above-identified application.☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.☐ A Petition for an Extension of Time for one month is enclosed.☒ No additional claim fee is required.☒ The fee has been calculated as shown.

	(Col. 1)		(Col. 2)	(Col. 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST PREV. PAID FOR	PRESENT EXTRA
TOTAL	* 86	MINUS	** 86	
INDEP.	* 3	MINUS	*** 3	
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE CLAIMS PETITION				
TOTAL ADDITIONAL FEE				

SMALL ENTITY	
RATE	ADDITIONAL FEE
x 9	\$
x 42	\$
+ 140	\$
	\$ 130
	\$ 130

OR

OR

TOTAL

OTHER THAN A SMALL ENTITY	
RATE	ADDITIONAL FEE
x 18	\$
x 84	\$
+ 280	\$
	\$
	\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed

☐ Please charge my Deposit Account No. 50 in the amount of \$_. A duplicate copy of this sheet is enclosed.☒ A check in the amount of \$ 130 is attached.

Respectfully submitted,

Joseph F. Walsh

OLYMPIC PATENT WORKS PLLC

Robert W. Bergstrom
Registration No. 39,906

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